



Volunteer Information Sheet

Name

Address

City

State

Zip

Home Phone

Work Phone

Cell Phone

Email Address

1. How did you find out about VSA arts of Iowa? _____

2. Have you volunteered with us in the past? _____ Yes _____ No

3. Where else have you volunteered?

4. Please List two references

Reference 1: Name _____
Phone _____ Position or Title _____

Reference 2: Name _____
Phone _____ Position or Title _____

5. What type of volunteer work are you interested in? (Check all that apply)

- ☐ Crafts with Children ☐ Bulk mailings
☐ Phoning ☐ Special Events (KidsFest, Tootsie Roll Drive)
☐ Other _____

Please return this form to our office by email, fax, or mail. You will be contacted with more details when it is two weeks prior to the event(s) you have selected.

Phone: 515.281.5839
Fax: 515.242.6025
Email: vsai@ed.state.ia.us

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